PÆDIATRICS.

UNDER THE CHARGE OF
LOUIS STARR, M.D.,
OF PHILADELPHIA ;
ASSISTED BY
THOMPSON S. WESTCOTT, M.D.,
OF PHILADELPHIA.

Paroxysmal Tachycardia in a Child.—HERRINGHAM (*Transactions of the Clinical Society of London*, January 8, 1897) described the case of a girl, eleven years of age, who for five years had suffered from sudden attacks of tachycardia coming on without determinable cause and lasting for periods varying from thirty-six hours to thirteen days, subsiding usually during sleep. In the course of the attack the pulse was very small and feeble and ranged from 240 to 260. There was slight præcordial discomfort, but no pain ; respiration was accelerated, and there was slight cyanosis, but no anasarca or signs of pulmonary œdema. Before her first attack the child had enjoyed robust health. At the time of observation she presented no sign of valvular lesion, but the volume of the heart was increased, suggesting the possibility of a lesion of the myocardium or pericardial adhesions. In the previous history there was no preceding attack of rheumatism, nor sign of hereditary syphilis. All means of treatment in this case seemed without benefit.

The Red Blood-corpuscle in Icterus Neonatorum.—KOSPFELMACHER (*Wiener medicinische Wochenschrift*, No. 43, 1896, S. 976) has made a study of this subject based upon twelve cases of icterus neonatorum observed in the clinic of Professor Schauta, with the following conclusions : 1. The number of red corpuscles found in the blood of newborn infants during the first week of life is not influenced by icterus. 2. The resistance of the corpuscles at birth is equal to that of the corpuscle in the adult, and is not modified during the first eight days by icterus, even of intense degree. 3. Microscopic examination of the blood of the newborn in the first days of life shows no sign of destruction of blood-corpuscles. It shows, on the contrary, the existence of a very active new formation of the red corpuscles.

Pseudo-bulbar Paralysis in Childhood.—BRAUER (*Deutsche Zeitschrift f. Nervenheilkunde*, 1897, S. 416) records an interesting case under this title in a girl fourteen years of age, who, at the age of eleven months, had a feverish attack with convulsions, which disappeared at the end of some days, leaving a symmetrical paralysis of the tongue and lips, with anæsthesia and dysphasia of mean intensity, and a hemiparesis of the right side with arrest of development of the arm.

At the author's examination there was noted to be a paralysis of the orbicularis oris, of the pterygoids, of the tongue and vulva. The paralyzed muscles showed no atrophy, fibrillary contractions, reaction of degeneration, or disturbances of sensation. The masseteric reflex was exaggerated, the pharyngeal reflex wanting The right arm was slightly shorter and weaker than the left; the right leg showed a slight paresis in the muscles supplied by the sciatic and peroneal nerves, with exaggerated knee-jerks. The principal phenomena were, therefore, those of a bulbar paralysis, but did not partake of the character of the progressive bulbar paralysis of Duchenné, since muscular atrophy and a slowly progressive course were absent. In the same way, polyneuritis, foci of inflammation, or softening in the bulb, and lesion of the muscles could be excluded, so that the author concluded that the lesion was supranuclear, or, in other words, that the condition was a pseudo-bulbar palsy.

PATHOLOGY AND BACTERIOLOGY.

UNDER THE CHARGE OF

JOHN SLADE ELY, M.D.,

PROFESSOR OF PATHOLOGY IN THE WOMAN'S MEDICAL COLLEGE OF THE NEW YORK INFIRMARY; INSTRUCTOR IN CLINICAL MICROSCOPY IN THE COLLEGE OF PHYSICIANS AND SURGEONS.

Summer Diarrhœas of Infants.—In a recent article entitled "A Bacteriological and Anatomical Study of the Summer Diarrhœas of Infants" BOOKER has added much to our knowledge of these disorders, not only as to their etiology, but as to the structural changes in the intestine incident to many of them, which at times prepare the way for general systemic infection.

Careful bacterial examinations of the stools were made in ninety-two different cases of various degrees of intensity, and in the fatal cases similar examinations of the intestinal contents and of the various internal organs were coupled with histological examinations with a view to determining the relation of the intestinal infections and lesions to the remoter changes in the body. As this represents the most exhaustive study of this subject which has yet been made, it seems proper to present the results somewhat in detail.

It was made clearly apparent by the study of the stools that no single species of micro-organism was responsible for the disease, and also, in a general way, that the character of the passages and the nature of the systemic disturbance conform to the character of the intestinal infection. The cases thus arrange themselves in four rather distinct groups.

In a considerable number of the cases the obligatory milk-feces bacteria were found to be the chief bacterial ingredient of the stools. These were for the most part mild cases, of short duration, and usually without apparent toxic symptoms. The stools were sometimes very frequent, were usually acid in reaction, and lacked uniformity of consistence, having been often lumpy. They contained no leucocytes. Twenty-four cases of this type were studied. Bacillus coli communis and bacillus lactis aërogenes preponderated. Other bacteria when present appeared in very small numbers and were apparently insignificant. In all these cases bacillus coli preponderated in the stools over bacillus lactis.

In another set of cases, represented by six only of the ninety-two, while